

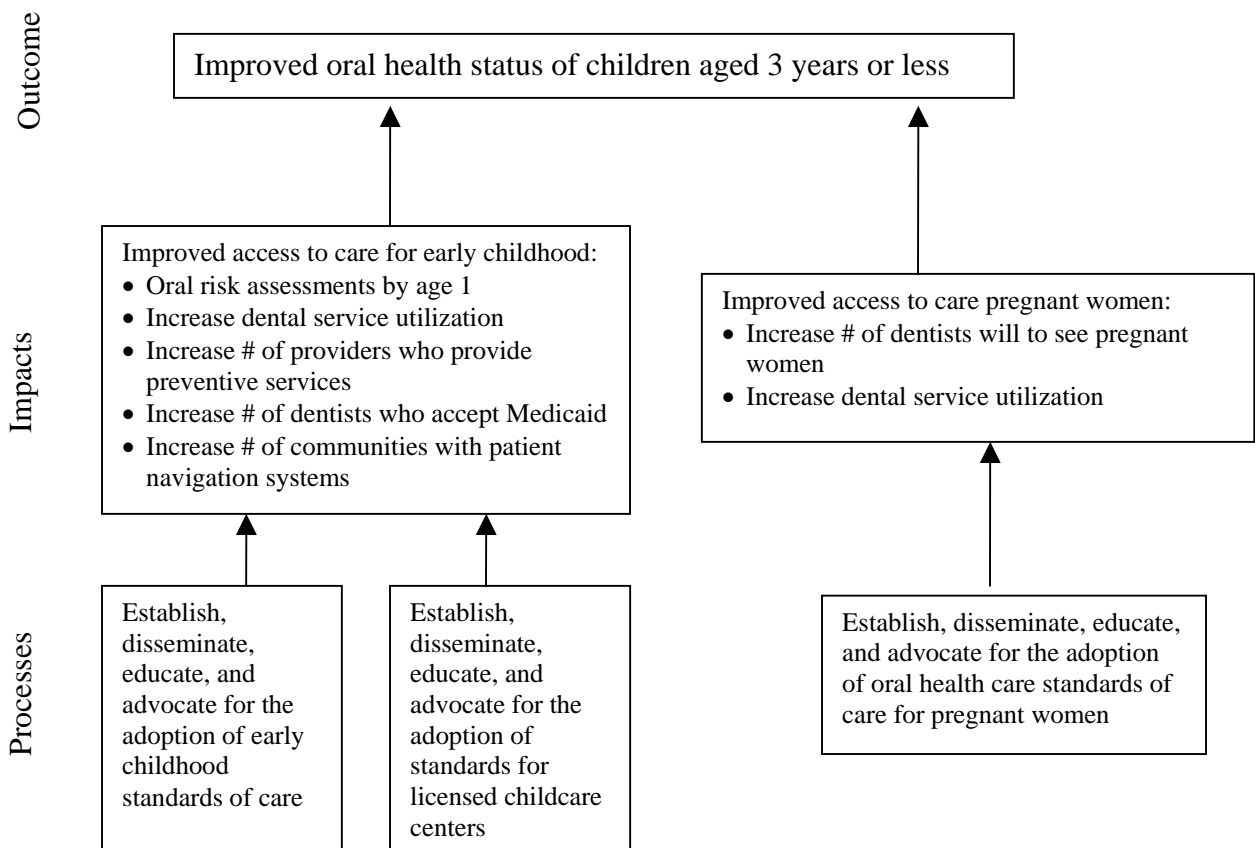
## Chapter 7: Special Populations

### Population III: Early Childhood

**Background** – The Coalition identified early childhood as a priority at the December 2006 Quarterly Advisory Summit. They agreed to develop a workgroup to address this portion of the State Oral Health Plan. First Steps, Head Start, Early Head Start, and child care centers are important key stakeholders and are represented on the Coalition and Advisory Council. The workgroup began their efforts in February 2007.

### Logic Model –

#### Logic Model:



## Objectives

### Access to Dental Care

#### *Early Childhood*

**6(III).1 100% of all children will receive an oral health risk assessment from either a dentist or primary care provider by age 1.**

**South Carolina Baseline** To be inserted

**Healthy People Reference** 21-1a Reduce the proportion of young children with dental caries experience in their primary teeth

Baseline (1988-94): 18% 2010 Target: 11%

**Original State Oral Health Plan Reference** – Priority 5; Strategy 5.1 (See Appendix G)

**Measurement Type** - Impact

**Data Collection Method** – DHEC Oral Health Surveillance System

**7(III).2 N% of children enrolled in Medicaid will receive an oral health risk assessment from either a dentist or primary care provider by age 1.**

**South Carolina Baseline** To be inserted

**Healthy People Reference** 21-1a Reduce the proportion of young children with dental caries experience in their primary teeth

Baseline (1988-94): 18% 2010 Target: 11%

21-12 Increase the proportion of low-income children and adolescents who received any preventive dental service during the past year.

Baseline (1996): 20% for kids under age 19 years 2010 Target: 57%

**Original State Oral Health Plan Reference** – Priority 5; Strategy 5.1, 5.4, and 5.5 (See Appendix G)

**Measurement Type** - Impact

**Data Collection Method** – DHEC Oral Health Surveillance System

**7(III).3 Increase to 10% of children enrolled in Medicaid who have at least one oral health service by age 3 by June 2008.**

**South Carolina Baseline:** 2006 Medicaid

**Healthy People Reference** 21-1a Reduce the proportion of young children with dental caries experience in their primary teeth

Baseline (1988-94): 18% 2010 Target: 11%

21-12 Increase the proportion of low-income children and adolescents who received any preventive dental service during the past year.

Baseline (1996): 20% for kids under age 19 years 2010 Target: 57%

**Original State Oral Health Plan Reference** – Priority 5; Strategy 5.1, 5.4, and 5.5 (See Appendix G)

**Measurement Type** - Impact

**Data Collection Method** – Medicaid claims data

**7(III).4 Increase to 10% the number of dental and medical professionals who provide preventive oral health services to children aged 3 years and younger by June 2010.**

**South Carolina Baseline** 2006 Medicaid Dental Utilization Data

**Healthy People Reference** 21-12 Increase the proportion of low-income children and adolescents who received any preventive dental service during the past year.

Baseline (1996): 20% for kids under age 19 years 2010 Target: 57%

**Original State Oral Health Plan Reference** – Priority 5; Strategy 5.1, 5.3, 5.4, and 5.5 (See Appendix G)

**Measurement Type** - Impact

**Data Collection Method** – Medicaid claims data and DHEC Oral Health Surveillance System

**7(III).5 Increase to % of dentists who accept Medicaid as a form of payment by June 2009.**

**South Carolina Baseline** 2006 Medicaid Dental Utilization Data

**Healthy People Reference** 21-12 Increase the proportion of low-income children and adolescents who received any preventive dental service during the past year.

Baseline (1996): 20% for kids under age 19 years 2010 Target: 57%

**Original State Oral Health Plan Reference** – Priority 5; Strategy 5.5 (See Appendix G)

**Measurement Type** - Impact

**Data Collection Method** – Medicaid claims data

**7(III).6 By June 2011, DHEC and the SC Oral Health Advisory Council and Coalition will conduct an educational campaign for primary care providers and dentists on the importance of early childhood oral health.**

**South Carolina Baseline** Not applicable

**Healthy People Reference** Not applicable

**Original State Oral Health Plan Reference** – Priority 5; Strategy 5.3 (See Appendix G)

**Measurement Type** - Process

**Data Collection Method** – Primary data collection to be determined

**7(III).7 By June 2011, DHEC and the SC Oral Health Advisory Council and Coalition will develop a Health Professionals (dental and medical) Office Toolkit for early childhood oral health that includes, but not limited to, a screening chart, tooth eruption chart, risk assessment forms, and parent/caregiver education materials.**

**South Carolina Baseline** Not applicable

**Healthy People Reference** Not applicable

**Original State Oral Health Plan Reference** – Priority 5; Strategy 5.3 (See Appendix G)

**Measurement Type** - Process

**Data Collection Method** – Primary data collection to be determined

**7(III).8 By June 2011, DHEC and the SC Oral Health Advisory Council and Coalition will conduct an educational campaign for pregnant women on infant oral health**

**South Carolina Baseline** Not applicable

**Healthy People Reference** Not applicable

**Original State Oral Health Plan Reference** – Priority 5; Strategy 5.3 (See Appendix G)

**Measurement Type** - Process

**Data Collection Method** – Primary data collection to be determined

**7(III).9 June 2011, DHEC and the SC Oral Health Advisory Council and Coalition will conduct an educational campaign for parents/caregivers of young children on infant oral health**

**South Carolina Baseline** Not applicable

**Healthy People Reference** Not applicable

**Original State Oral Health Plan Reference** – Priority 5; Strategy 5.3 (See Appendix G)

**Measurement Type** - Process

**Data Collection Method** – Primary data collection to be determined

**7(III).10 By June 2011, DHEC and the SC Oral Health Advisory Council and Coalition will review Early Head Start communication strategies as a potential model for physicians, dentists, and parents on the importance of early childhood oral health.**

**South Carolina Baseline** Not applicable

**Healthy People Reference** Not applicable

**Original State Oral Health Plan Reference** – Priority 5; Strategy 5.3 (See Appendix G)

**Measurement Type** - Process

**Data Collection Method** – Primary data collection to be determined

**7(III).11 By June 2011 , DHEC and the SC Oral Health Advisory Council and Coalition will establish a business/economic model for dental examinations conducted by dentists for children by age one.**

**South Carolina Baseline** Not applicable

**Healthy People Reference** Not applicable

**Original State Oral Health Plan Reference** – Priority 5; Strategy 5.3 (See Appendix G)

**Measurement Type** - Process

**Data Collection Method** – Primary data collection to be determined

**7(III).12 By June 2011, DHEC and the SC Oral Health Advisory Council and Coalition will engage Medicaid Managed Care entities to facilitate integration of oral health risk assessments for children aged 3 years and younger.**

**South Carolina Baseline** Not applicable

**Healthy People Reference** Not applicable

**Original State Oral Health Plan Reference** – Priority 5; Strategy 5.3 (See Appendix G)

**Measurement Type** - Process

**Data Collection Method** – Primary data collection to be determined

**7(III).13 By June 2008, DHEC and the SC Oral Health Advisory Council and Coalition will establish baseline county-specific market penetration for Medicaid beneficiaries aged 3 years and younger (# of kids seen by dentists in county/Medicaid enrollment rate by county).**

**South Carolina Baseline** 2007 Medicaid Data

**Healthy People Reference** Not applicable

**Original State Oral Health Plan Reference** – Priority 5; Strategy 5.3 (See Appendix G)

**Measurement Type** - Process

**Data Collection Method** – Primary data collection to be determined

**7(III).14 By June 2011, increase the number of communities to 10 that have early childhood patient navigation solutions for oral health care.**

**South Carolina Baseline** Not applicable

**Healthy People Reference** Not applicable

**Original State Oral Health Plan Reference** – Priority 5; Strategy 5.1, 5.4, 5.5 (See Appendix G)

**Measurement Type** - Impact

**Data Collection Method** – Evidence of infrastructure and policy changes

**7(III).15 By June 2011, DHEC and the SC Oral Health Advisory Council and Coalition will document “best practices” of patient navigation strategies that improve oral health utilization for children 3 years and younger.**

**South Carolina Baseline** Not applicable

**Healthy People Reference** Not applicable

**Original State Oral Health Plan Reference** – Priority 5; Strategy 5.1, 5.4, 5.5 (See Appendix G)

**Measurement Type** - Process

**Data Collection Method** – Evidence of model

**7(III).16 By June 2011, DHEC and the SC Oral Health Advisory Council and Coalition will identify communities at highest risk for early childhood oral health problems.**

**South Carolina Baseline** Not applicable

**Healthy People Reference** Not applicable

**Original State Oral Health Plan Reference** – Priority 5; Strategy 5.1, 5.4, 5.5 (See Appendix G)

**Measurement Type** - Process

**Data Collection Method** – Evidence of information

**7(III).17 By June 2011, DHEC and the SC Oral Health Advisory Council and Coalition will identify funding for replication of best practices and demonstration projects for early childhood oral health patient navigation models.**

**South Carolina Baseline** Not applicable

**Healthy People Reference** Not applicable

**Original State Oral Health Plan Reference** – Priority 5; Strategy 5.1, 5.4, 5.5 (See Appendix G)

**Measurement Type** - Process

**Data Collection Method** – Evidence of information

**7(III).18 By June 2011, DHEC and the SC Oral Health Advisory Council and Coalition will document “best practices” of support systems that increase dental appointment keeping.**

**South Carolina Baseline** Not applicable

**Healthy People Reference** Not applicable

**Original State Oral Health Plan Reference** – Priority 5; Strategy 5.1, 5.4, 5.5 (See Appendix G)

**Measurement Type** - Process

**Data Collection Method** – Evidence of information

**7(III).19 By June 2011, DHEC and the SC Oral Health Advisory Council and Coalition will seek funding for replication of best practices and demonstration projects aimed at enabling parents to keep dental appointments for their children.**

**South Carolina Baseline** Not applicable

**Healthy People Reference** Not applicable

**Original State Oral Health Plan Reference** – Priority 5; Strategy 5.1, 5.4, 5.5 (See Appendix G)

**Measurement Type** - Process

**Data Collection Method** – Evidence of information

### *Pregnant Women*

**7(III).20 The number of dentists willing to see pregnant women will increase to N% by 2011.**

**South Carolina Baseline** To be inserted

**Healthy People Reference** Not applicable

**Original State Oral Health Plan Reference** – Priority 5; Strategy 5.3 (See Appendix G)

**Measurement Type** - Impact

**Data Collection Method** – Medicaid claims data and primary data collection (to be determined).

**7(III).21 The number of pregnant women with improved oral health utilization will increase to N% by June 2011.**

**South Carolina Baseline** To be inserted

**Healthy People Reference** Not applicable

**Original State Oral Health Plan Reference** – Priority 5; Strategy 5.3 (See Appendix G)

**Measurement Type** - Impact

**Data Collection Method** – Primary data collection (to be determined)

**7(III).21 By June 2011 DHEC and the SC Oral Health Advisory Council and Coalition will develop a financial case for third party payers that supports reimbursing oral health care for pregnant women.**

**South Carolina Baseline** To be inserted

**Healthy People Reference** Not applicable

**Original State Oral Health Plan Reference** – Priority 5; Strategy 5.3 (See Appendix G)

**Measurement Type** - Process

**Data Collection Method** – Evidence of the product

**7(III).22 By June 2011, DHEC and the SC Oral Health Advisory Council and Coalition will secure funding for a pilot project that demonstrates the value of oral health care during pregnancy.**

**South Carolina Baseline** PRAMS

**Healthy People Reference** Not applicable

**Original State Oral Health Plan Reference** – Priority 5; Strategy 5.3 (See Appendix G)

**Measurement Type** - Process

**Data Collection Method** – Evidence of the product

**7(III).23 By June 2011, the SC Oral Health Advisory Council and Coalition will advocate for expansion of Medicaid coverage to include oral health care for pregnant women.**

**South Carolina Baseline** To be inserted

**Healthy People Reference** Not applicable

**Original State Oral Health Plan Reference** – Priority 5; Strategy 5.3 (See Appendix G)

**Measurement Type** - Process

**Data Collection Method** – Evidence of advocacy work

## **Standards of Care**

### ***Early Childhood Oral Health***

**7(III).24 By June 2009, DHEC and the SC Oral Health Advisory Council and Coalition will form a workgroup to develop a publication of clinical practice guidelines established by AAP and AAPD (similar to a product from New York State) for early childhood oral health in South Carolina.**

**South Carolina Baseline** Not applicable

**Healthy People Reference** Not applicable

**Original State Oral Health Plan Reference** – Priority 5; Strategy 5.3 (See Appendix G)

**Measurement Type** - Process

**Data Collection Method** – Evidence of the product

**7(III).25 By September 2009, DHEC and the SC Oral Health Advisory Council and Coalition will engage Medicaid Managed Care entities and SC Blue Cross/Blue Shield to promote early childhood oral health clinical practice guidelines.**

**South Carolina Baseline** Not applicable

**Healthy People Reference** Not applicable

**Original State Oral Health Plan Reference** – Priority 5; Strategy 5.3 (See Appendix G)

**Measurement Type** - Process

**Data Collection Method** – Evidence of presentation through meeting minutes and dissemination strategies by partners.

**7(III).26 By June 2009, DHEC and the SC Oral Health Advisory Council and Coalition will engage the state's medical and dental education programs to incorporate early childhood oral health clinical practice guidelines into curricula.**

**South Carolina Baseline** Not applicable

**Healthy People Reference** Not applicable

**Original State Oral Health Plan Reference** – Priority 5; Strategy 5.3 (See Appendix G)

**Measurement Type** - Process

**Data Collection Method** – Evidence of curricular changes

**7(III).27 By September 2009, DHEC and the SC Oral Health Advisory Council and Coalition will disseminate early childhood oral health clinical practice guidelines to dental hygienist and dental assistant professional organizations.**

**South Carolina Baseline** Not applicable

**Healthy People Reference** Not applicable

**Original State Oral Health Plan Reference** – Priority 5; Strategy 5.3 (See Appendix G)

**Measurement Type** - Process

**Data Collection Method** – Evidence of presentation through meeting minutes or conference proceedings.

**6(III).28 By September 2009, DHEC and the SC Oral Health Advisory Council and Coalition will engage the state’s dental hygiene and assisting programs to incorporate early childhood oral health clinical practice guidelines into curricula.**

**South Carolina Baseline** Not applicable

**Healthy People Reference** Not applicable

**Original State Oral Health Plan Reference** – Priority 5; Strategy 5.3 (See Appendix G)

**Measurement Type** - Process

**Data Collection Method** – Evidence of curricular changes

#### *Oral Health Care for Pregnant Women*

**7(III).30 By June 2008, DHEC and the SC Oral Health Advisory Council and Coalition will form a workgroup to develop a publication of clinical practice guidelines established by New York State based on recommendations from professional organizations for oral health care of pregnant women in South Carolina.**

**South Carolina Baseline** Not applicable

**Healthy People Reference** Not applicable

**Original State Oral Health Plan Reference** – Priority 5; Strategy 5.3 (See Appendix G)

**Measurement Type** - Process

**Data Collection Method** – Evidence of the product

**7(III).31 By June 2011, DHEC and the SC Oral Health Advisory Council and Coalition will engage Medicaid Managed Care entities and SC Blue Cross/Blue Shield to promote oral health care clinical practice guidelines for pregnant women.**

**South Carolina Baseline** Not applicable

**Healthy People Reference** Not applicable

**Original State Oral Health Plan Reference** – Priority 5; Strategy 5.3 (See Appendix G)

**Measurement Type** - Process

**Data Collection Method** – Evidence of presentation through meeting minutes and dissemination strategies by partners.

**6(III).32 By June 2011, DHEC and the SC Oral Health Advisory Council and Coalition will conduct an education campaign for dentists and medical providers who deliver babies on oral health practice guidelines for pregnant women.**

**South Carolina Baseline** Not applicable

**Healthy People Reference** Not applicable

**Original State Oral Health Plan Reference** – Priority 5; Strategy 5.3 (See Appendix G)



**Measurement Type** - Process

**Data Collection Method** – Evidence of the product and primary data collection (to be determined)

**7(III).33 By 2011, DHEC and the SC Oral Health Advisory Council and Coalition will conduct an education campaign for pregnant women on the clinical practice guidelines for their oral health care.**

**South Carolina Baseline** To be inserted

**Healthy People Reference** Not applicable

**Original State Oral Health Plan Reference** – Priority 5; Strategy 5.3 (See Appendix G)

**Measurement Type** - Process

**Data Collection Method** – Evidence of the product and primary data collection (to be determined)

**6(III).34 By 2011, DHEC and the SC Oral Health Advisory Council and Coalition will engage the state’s medical and dental programs to incorporate oral health care clinical practice guidelines for pregnant women into curricula.**

**South Carolina Baseline** Not applicable

**Healthy People Reference** Not applicable

**Original State Oral Health Plan Reference** – Priority 5; Strategy 5.3 (See Appendix G)

**Measurement Type** - Process

**Data Collection Method** – Evidence of curricular changes

**7(III).35 By 2011, DHEC and the SC Oral Health Advisory Council and Coalition will disseminate oral health care clinical practice guidelines for pregnant women to dental hygienist and dental assistant professional organizations.**

**South Carolina Baseline** Not applicable

**Healthy People Reference** Not applicable

**Original State Oral Health Plan Reference** – Priority 5; Strategy 5.3 (See Appendix G)

**Measurement Type** - Process

**Data Collection Method** – Evidence of presentation through meeting minutes or conference proceedings.

**7(III).36 By 2011, DHEC and the SC Oral Health Advisory Council and Coalition will engage the state’s dental hygiene and assisting programs to incorporate oral health clinical practice guidelines for pregnant women into curricula.**

**South Carolina Baseline** Not applicable

**Healthy People Reference** Not applicable

**Original State Oral Health Plan Reference** – Priority 5; Strategy 5.3 (See Appendix G)

**Measurement Type** - Process

**Data Collection Method** – Evidence of curricular changes

#### *Licensed Childcare Centers*

**6(III).37 By 2011, N% of childcare centers will have received early childhood oral health education from the DHEC/EdVenture collaborative using “General Oral Health 101” or**

**“Oral Injury Prevention,” in order to meet their health and safety requirements for licensure.**

**South Carolina Baseline** Not applicable

**Healthy People Reference** Not applicable

**Original State Oral Health Plan Reference** – Priority 5; Strategy 5.3 (See Appendix G)

**Measurement Type** - Process

**Data Collection Method** – Evidence of trainings

**7(III).38 By 2011, the DHEC/EdVenture collaborative will provide “Train-the-trainer” support to (insert number) Early Head Start and other key stakeholders.**

**South Carolina Baseline** Not applicable

**Healthy People Reference** Not applicable

**Original State Oral Health Plan Reference** – Priority 5; Strategy 5.3 (See Appendix G)

**Measurement Type** - Process

**Data Collection Method** – Evidence of meeting minutes and resulting standards.

**6(III).39 By 2011, DHEC and the SC Oral Health Advisory Council and Coalition will engage First Steps in developing oral health promotion standards for childcare centers in South Carolina.**

**South Carolina Baseline** Not applicable

**Healthy People Reference** Not applicable

**Original State Oral Health Plan Reference** – Priority 5; Strategy 5.3 (See Appendix G)

**Measurement Type** - Process

**Data Collection Method** – Evidence of meeting minutes and resulting standards.

**7(III).40 By 2011, DHEC and the SC Oral Health Advisory Council and Coalition will engage SC Strengthening Families Leadership Team in developing oral health promotion standards, in conjunction with First Steps, for childcare centers in South Carolina.**

**South Carolina Baseline** Not applicable

**Healthy People Reference** Not applicable

**Original State Oral Health Plan Reference** – Priority 5; Strategy 5.3 (See Appendix G)

**Measurement Type** - Process

**Data Collection Method** – Evidence of meeting minutes and resulting standards.

**7(III).1 The Division of Oral Health staff will provide training to First Steps programs lacking an oral health program, as well as child care center training at the 16 technical colleges on including oral health as part of total health by January 2006.**

**South Carolina Baseline** Not applicable

**Healthy People Reference** 7-11u: Increase the proportion of local health departments that have established culturally appropriate and linguistically competent community health promotion and disease prevention programs, with regards to oral health

Baseline (1996-97): 25%

2010 Target: 50%

**Original State Oral Health Plan Reference** – Priority 5; Strategy 5.3 (See Appendix G)

**Measurement Type** - Process

**Data Collection Method** – Evidence of deliverables, which will be monitored through the Coalition

**7(III).2 By January 2011, 50% of all child care centers with an oral health component will adopt “Good Start, Grow Smart” guidelines.**

**South Carolina Baseline** Not applicable

**Healthy People Reference** 7-11u: Increase the proportion of local health departments that have established culturally appropriate and linguistically competent community health promotion and disease prevention programs, with regards to oral health

Baseline (1996-97): 25%

2010 Target: 50%

**Original State Oral Health Plan Reference** – Priority 5; Strategy 5.3 (See Appendix G)

**Measurement Type** - Process

**Data Collection Method** – Evidence of deliverables, which will be monitored through the Coalition

**Comments** – The two objectives identified to date reflect existing programs implemented by DHEC in coordination with Coalition partners. The early childhood component will be developed by a Coalition workgroup beginning February 2007.

